Fill in this in	nformation to identify your	case:		Ĭ	
Debtor 1	Kendrick William			ž.	
Debtor	First Name	Middle Name	Last Name		
Debtor 2	First Name	Middle Nome	Last Name		
(Spouse if, filing		Middle Name			
United State	s Bankruptcy Court for the:	NORTHERN DISTRICT	OF ALABAMA		
Case number	er <u>17-70027</u>				Check if this is an amended filing
Summar Be as compl information.	ete and accurate as possil Fill out all of your schedu	ole. If two married people les first; then complete th	nd Certain Statistical Informate are filing together, both are equally response information on this form. If you are filing	sible for sup	12/15 plying correct hedules after you file
your origina	forms, you must fill out a	new Summary and check	k the box at the top of this page.		
Part 1 St	ımmarize Your Assets				
					our assets alue of what you own
1. Schede 1a. Cop	ule A/B: Property (Official F by line 55, Total real estate,	orm 106A/B) from Schedule A/B		\$	87,000.0
1b. Cop	y line 62, Total personal pro	perty, from Schedule A/B.		\$	17,201.0
1c. Cop	y line 63, Total of all proper	y on Schedule A/B		\$	104,201.0
Part 2: St	mmarize Your Liabilities				
					our liabilities mount you owe
2. Schedu 2a. Cop	le D: Creditors Who Have C y the total you listed in Colu	laims Secured by Property mn A, Amount of claim, at	(Official Form 106D) the bottom of the last page of Part 1 of <i>Schedu</i>	ıle D \$	100,870.1
3. Schedu 3a. Cop	le E/F: Creditors Who Have y the total claims from Part	Unsecured Claims (Officia 1 (priority unsecured claim	l Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>	\$	0.0
3b. Cop	y the total claims from Part	2 (nonpriority unsecured c	laims) from line 6j of Schedule E/F	\$	33,879.1
			Your total lia	bilities \$	134,749.37
Part 3: Su	mmarize Your Income and	I Expenses			
4. Schedu	le I: Your Income (Official Fe	orm 106I)		_	2 000 4
Сору ус	our combined monthly incom	e from line 12 of Schedule	· L	\$	3,932.5
5∈ Schedu Copy ye	<i>le J: Your Expenses</i> (Officia our monthly expenses from I	l Form 106J) ine 22c of <i>Schedule J</i>		\$	3,502.0
Part 4: Ar	swer These Questions for	Administrative and Stati	stical Records		
	ı filing for bankruptcy und . You have nothing to repor		heck this box and submit this form to the court	with your othe	er schedules.
Ye Ye	s nd of debt do you have?				
■ Yo	ur debts are primarily con usehold purpose." 11 U.S.C	sumer debts. Consumer o § 101(8). Fill out lines 8-9	debts are those "incurred by an individual prime of for statistical purposes. 28 U.S.C. § 159.	arily for a pers	sonal, family, or
□ Yo	ur debts are not primarily	consumer debts. You have	ve nothing to report on this part of the form. Ch	eck this box a	and submit this form to
	court with your other sched		lities and Certain Statistical Information		page 1 of 2

Case 17-70027-JHH13 Doc 16 Filed 01/13/17 Entered 01/13/17 09:11:45 Desc Main Document Page 1 of 34

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8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

3,621.77

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clai	m
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	ormation to identify	your case and ti		E STATE OF S		7	
Debtor 1	Kendrick Wil		- None	Last Name			
Debtor 2	First Name	Middle	e Name	Last Name			
(Spouse, if filing)	First Name	Middle	e Name	Last Name	`		
Jnited States E	Bankruptcy Court for	the: NORTHER	RN DISTRIC	CT OF ALABAMA			
Case number	17-70027						Check if this is an amended filing
Official F	orm 106A/B						
	le A/B: Pr						12/15
hink it fits best. nformation. If mo unswer every que	Be as complete and a ore space is needed, a estion.	ccurate as possibl attach a separate si	le. If two ma heet to this	ly once. If an asset fits in more than irried people are filing together, both form. On the top of any additional paratter. tate You Own or Have an interest in	are equally resp	ponsible for su	pplying correct
				ce, building, land, or similar property	?		
□ No. Go to Pa	art 2						
Voc Mhore	s is the property?						
Yes. Where	e is the property?						
Yes. Where	e is the property?						
	e is the property?		What is 1	the property? Check all that apply			
.1	e is the property?			the property? Check all that apply ingle-family home	Do not dec	duct secured cla	aims or exemptions. Put
.1 6820 Col		pription	Si		the amoun	nt of any secure	d claims on Schedule D:
.1 6820 Col	ld Springs Rd.	cription	■ Si	ingle-family home	the amoun	nt of any secure	
.1 6820 Col	ld Springs Rd.	cription	Si Si	ingle-family home uplex or multi-unit building ondominium or cooperative	the amoun	nt of any secure	d claims on Schedule D:
.1 6820 Col	Id Springs Rd. s, if available, or other desc		Si Si Di	ingle-family home uplex or multi-unit building ondominium or cooperative lanufactured or mobile home	the amoun Creditors to Current va	nt of any secure Who Have Clain alue of the	d claims on Schedule D: ns Secured by Property. Current value of the
6820 Col Street address	Id Springs Rd. s, if available, or other desc	35453-0000 ZIP Code	Si Si Di Ci	ingle-family home uplex or multi-unit building ondominium or cooperative	the amoun Creditors to Current va entire pro	nt of any secure Who Have Clain alue of the	d claims on Schedule D: ns Secured by Property. Current value of the portion you own?
6820 Col Street address	ld Springs Rd. ss, if available, or other desc	35453-0000	Si Si Ci	ingle-family home uplex or multi-unit building ondominium or cooperative lanufactured or mobile home and	Current va entire pro	nt of any secure Who Have Clain alue of the perty? 87,000.00	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$87,000.00
6820 Col Street address	ld Springs Rd. ss, if available, or other desc	35453-0000	Si Si Di Ci	ingle-family home uplex or multi-unit building ondominium or cooperative lanufactured or mobile home and ivestment property imeshare ither	Current va entire pro	alue of the perty? 87,000.00 the nature of yee simple, ten	current value of the portion you own? \$87,000.00
6820 Col Street address	ld Springs Rd. ss, if available, or other desc	35453-0000	Si Si Di Ci	ingle-family home uplex or multi-unit building ondominium or cooperative lanufactured or mobile home and livestment property limeshare ther s an interest in the property? Check or	Current ve entire pro Describe (such as f	alue of the perty? 87,000.00 the nature of y fee simple, tente), if known.	current value of the portion you own? \$87,000.00
6820 Col Street address Cottonda	Id Springs Rd. ss, if available, or other desc ale AL State	35453-0000	Si Si Di Ci	ingle-family home uplex or multi-unit building ondominium or cooperative lanufactured or mobile home and evestment property imeshare ther s an interest in the property? Check or ebtor 1 only	Current va entire pro	alue of the perty? 87,000.00 the nature of y fee simple, tente), if known.	current value of the portion you own? \$87,000.00
6820 Col Street address	Id Springs Rd. ss, if available, or other desc ale AL State	35453-0000	Si Di Co M La In Ti Of Who has	ingle-family home uplex or multi-unit building ondominium or cooperative lanufactured or mobile home and expectment property imeshare ther an interest in the property? Check or ebtor 1 only ebtor 2 only	Current va entire pro Describe ((such as f a life estar	alue of the perty? 87,000.00 the nature of y fee simple, tente), if known.	current value of the portion you own? \$87,000.00 Sour ownership interest ancy by the entireties, or
6820 Col Street address Cottonda City	Id Springs Rd. ss, if available, or other desc ale AL State	35453-0000	Si Di Ci M La In Ti Oi Who has	ingle-family home uplex or multi-unit building ondominium or cooperative lanufactured or mobile home and evestment property imeshare ther s an interest in the property? Check or ebtor 1 only	Current valentire pro Describe (such as fee Sim	alue of the perty? 87,000.00 the nature of y fee simple, tente), if known.	current value of the portion you own? \$87,000.00
6820 Col Street address Cottonda City	Id Springs Rd. ss, if available, or other desc ale AL State	35453-0000	Si Di Ci M In Ti Oi Who has	ingle-family home uplex or multi-unit building ondominium or cooperative lanufactured or mobile home and evestment property imeshare ther an interest in the property? Check or ebtor 1 only ebtor 2 only	Current va entire pro Describe (such as f a life esta) Fee Sim	alue of the perty? 87,000.00 the nature of y fee simple, tente), if known. nple	current value of the portion you own? \$87,000.00 Sour ownership interest ancy by the entireties, or
6820 Col Street address Cottonda City	Id Springs Rd. ss, if available, or other desc ale AL State	35453-0000	Si Di Ci M In Ti Oi Who has Di At Other inf	ingle-family home uplex or multi-unit building ondominium or cooperative lanufactured or mobile home and evestment property imeshare ther an interest in the property? Check or ebtor 1 only ebtor 2 only teleast one of the debtors and another	Current va entire pro Describe (such as f a life esta) Fee Sim	alue of the perty? 87,000.00 the nature of y fee simple, tente), if known. nple	current value of the portion you own? \$87,000.00 Sour ownership interest ancy by the entireties, or
6820 Col Street address Cottonda City	Id Springs Rd. ss, if available, or other desc ale AL State	35453-0000	Si Di Ci M In Ti Oi Who has Di At Other inf	ingle-family home uplex or multi-unit building ondominium or cooperative lanufactured or mobile home and evestment property imeshare ther an interest in the property? Check or ebtor 1 only ebtor 2 only t least one of the debtors and another formation you wish to add about this	Current va entire pro Describe (such as f a life esta) Fee Sim	alue of the perty? 87,000.00 the nature of y fee simple, tente), if known. nple	current value of the portion you own? \$87,000.00 Secured by Property.
6820 Col Street address Cottonda City	Id Springs Rd. ss, if available, or other desc ale AL State	35453-0000	Si Di Ci M In Ti Oi Who has Di At Other inf	ingle-family home uplex or multi-unit building ondominium or cooperative lanufactured or mobile home and evestment property imeshare ther an interest in the property? Check or ebtor 1 only ebtor 2 only t least one of the debtors and another formation you wish to add about this	Current va entire pro Describe (such as f a life esta) Fee Sim	alue of the perty? 87,000.00 the nature of y fee simple, tente), if known. nple	current value of the portion you own? \$87,000.00 Secured by Property.
6820 Col Street address Cottonda City Tuscalog County	Id Springs Rd. Id Springs Rd. Is, if available, or other described and the state State Islam value of the point and the state of	35453-0000 ZIP Code	Si Di Ci Mi In In Oi Who has Di At Other inf property	ingle-family home uplex or multi-unit building ondominium or cooperative lanufactured or mobile home and evestment property imeshare ther an interest in the property? Check or ebtor 1 only ebtor 2 only t least one of the debtors and another formation you wish to add about this	Current valentire pro Describe to (such as fee Simulation of the continuous of the	alue of the perty? 87,000.00 the nature of y fee simple, tente), if known. nple	current value of the portion you own? \$87,000.00 Secured by Property.

someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B

Schedule A/B: Property

page 1

Deb	tor 1	Kendrick Williams		Case number (if known)	17-70027
3. C a	ars, vans	, trucks, tractors, sport utility ve	hicles, motorcycles		
	No				
	Yes				
3.1	Make:	Hummer	Who has an Interest in the property? Check one		ured claims or exemptions. Put
5.1	Model:	H-3	Debtor 1 only		secured claims on Schedule D: ve Claims Secured by Property.
	Year:	2006	Debtor 2 only	Current value of t	the Current value of the
	Approxi	mate mileage: 158200	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other in	formation:	\square At least one of the debtors and another		
			☐ Check if this is community property	\$13,100	.00 \$13,100.00
			(see instructions)	-	
-	, 20			Do not deduct sec	ured claims or exemptions. Put
3.2	Make:	Mercedes-Benz	Who has an interest in the property? Check one	the amount of any	secured claims on Schedule D:
	Model:	Kompresso	Debtor 1 only	Creditors Who Ha	ve Claims Secured by Property.
	Year:	2002	Debtor 2 only	Current value of t	the Current value of the portion you own?
		mate mileage: 190,000	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property?	portion you own?
	Other in	formation:	At least one of the debtors and another		
			☐ Check if this is community property	\$2,000	2.00 \$2,000.00
			(see instructions)		
5 A	dd the do	ollar value of the portion you ow	n for all of your entries from Part 2, includin	g any entries for	\$15,100.00
.p	ages you	have attached for Part 2. Write t	that number here		
Part	3 Descri	be Your Personal and Household Ite	ems		
Do y	ou own o		terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
. Ho	usehold	goods and furnishings Major appliances, furniture, linens,	china kitchenware		
	No	major appliances, farmare, illiene,	, 6,111,111,111,111,111	· ·	
	Yes. De	scribe		Å,	
		Furniture, Furni	shings, Electronics and Appliances		\$1,500.00
		Tarinary, van			
Ε	ectronics xamples:	Televisions and radios; audio, vide including cell phones, cameras, m	eo, stereo, and digital equipment; computers, p ledia players, games	rinters, scanners; music c	ollections; electronic devices
	Yes. De	scribe			
. Co	xamples:	s of value Antiques and figurines; paintings, _l other collections, memorabilia, col	prints, or other artwork; books, pictures, or othe lectibles	er art objects; stamp, coin,	or baseball card collections;
	No Yes. De	scribe			

Official Form 106A/B

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Schedule A/B: Property

page 2

D	ebtor 1	Kendrick Wil	illiams		Case number (if known)	17-70027
9.	Example	ent for sports ar es: Sports, photog musical instru	graphic, exercise, and other he	obby equipment; bicycles, pool tables	s, golf clubs, skis; canoes a	and kayaks; carpentry tools;
	■ No □ Yes.	Describe				
10	■ No	oles: Pistols, rifles	s, shotguns, ammunition, and r	elated equipment		
4.4		Describe				
' '	□ No	oles: Everyday clo	othes, furs, leather coats, desig	ner wear, shoes, accessories		
	Yes.	Describe			1	\$500.00
_			Clothing	210-24		\$500.00
12	■ No	y oles: Everyday jev Describe	welry, costume jewelry, engage	ement rings, wedding rings, heirloom	jewelry, watches, gems, g	old, silver
13	Examp	rm animals bles: Dogs, cats, b	birds, horses			
14	■ No	her personal and		ot already list, including any healtl	h aids you did not list	
18				rt 3, including any entries for page	s you have attached	\$2,000.00
Pa	art 4: Des	scribe Your Financ	cial Assets			
D	o you ow	n or have any le	egal or equitable interest in a	ny of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	□ No		have in your wallet, in your hon	ne, in a safe deposit box, and on han	d when you file your petiti	on
	, <u></u> , 1 00				Cash On Hand	\$100.00
17.	Deposi Examp	ts of money les: Checking, sa institutions. I	avings, or other financial accou	nts; certificates of deposit; shares in vith the same institution, list each.	credit unions, brokerage h	nouses, and other similar
	□ No ■ Yes		•	Institution name:		
			17.1. Checking	First Convenience Bank o	of Texas	\$1.00

Official Form 106A/B

Schedule A/B: Property

page 3

De	ebtor 1	Kendrick Williams	Case number (if known)	17-70027
18.	Exampl	mutual funds, or publicly traded stocks es: Bond funds, investment accounts with brokerage firms, money	market accounts	
	■ No □ Yes	Institution or issuer name:		
19.		blicly traded stock and interests in incorporated and unincorp	orated businesses, including an interest	in an LLC, partnership, and
	■ No			
	☐ Yes. (Give specific information about them Name of entity:	% of ownership:	
20.	Negotia	ment and corporate bonds and other negotiable and non-negotiable instruments include personal checks, cashiers' checks, promis gotiable instruments are those you cannot transfer to someone by	sory notes, and money orders.	
	☐ Yes. G	Sive specific information about them Issuer name:		
21.	Retirem Exampl	ent or pension accounts es: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings a	ccounts, or other pension or profit-sharing p	olans
	☐ Yes. L	ist each account separately. Type of account: Institution nam	ne:	
22.	Your sh	deposits and prepayments are of all unused deposits you have made so that you may continues: Agreements with landlords, prepaid rent, public utilities (electric	ne service or use from a company c, gas, water), telecommunications compani	es, or others
	■ No □ Ves	Institution nam	ne or individual:	
		es (A contract for a periodic payment of money to you, either for life	or for a number of years)	
23.	No No	is (A contract for a periodic payment or money to you, entire for mo	of for a fidinisor of yours,	
	☐ Yes	Issuer name and description.		
	26 U.S.C	in an education IRA, in an account in a qualified ABLE progra §§ 530(b)(1), 529A(b), and 529(b)(1).	am, or under a qualified state tuition pro	gram.
	■ No □ Yes	Institution name and description. Separately file the r	ecords of any interests.11 U.S.C. § 521(c):	
	■ No	equitable or future interests in property (other than anything l	isted in line 1), and rights or powers exe	cisable for your benefit
		Give specific information about them		
	Patents, Example	copyrights, trademarks, trade secrets, and other intellectual es: Internet domain names, websites, proceeds from royalties and	property licensing agreements	
		Give specific information about them		
	Example —	s, franchises, and other general intangibles es: Building permits, exclusive licenses, cooperative association h	oldings, liquor licenses, professional license	es
	■ No □ Yes.(Sive specific information about them		
Mo	ney or p	roperty owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.

page 4 Schedule A/B: Property

De	ebtor 1	Kendrick Williams		Case number (if known)	17-70027
28.	Tax ref	unds owed to you			
	Yes.	Give specific information abou	t them, including whether you already filed the returns a	and the tax years	
			Debtor received a tax refund for the prior tax year in the amount of \$9,396.00; a of which was used for ordinary living expenses, and, as of the petition filing date, none of the refund remains. However, this constitutes an average refund, and the average monthly amount of \$783.00 has been added to Schedule "!" as projected disposable income for this Plan.	g o	\$0.00
	Examp No	support oles: Past due or lump sum alir Give specific information	nony, spousal support, child support, maintenance, div	orce settlement, property	settlement
	Examp	amounts someone owes you bles: Unpaid wages, disability in benefits; unpaid loans you Give specific information	nsurance payments, disability benefits, sick pay, vacati	on pay, workers' comper	sation, Social Security
	Examp No		surance; health savings account (HSA); credit, homeov	wner's, or renter's insuran	ce
	⊔ Yes.		of each policy and list its value. y name: Benefic	ary:	Surrender or refund value:
	If you a someo	terest in property that is due are the beneficiary of a living tr ne has died. Give specific information	you from someone who has died ust, expect proceeds from a life insurance policy, or are	e currently entitled to rece	ive property because
	Examp No	les: Accidents, employment di	er or not you have filed a lawsuit or made a demand sputes, insurance claims, or rights to sue	d for payment	
34.	Other o	Describe each claim contingent and unliquidated Describe each claim	claims of every nature, including counterclaims of	the debtor and rights to	set off claims
	■ No	ancial assets you did not alr	eady list		
36			entries from Part 4, including any entries for pages		\$101.00
Pa	rt 5: Des	scribe Any Business-Related Pro	perty You Own or Have an Interest In. List any real estate	in Part 1.	
1	No. Go	to Part 6.	e interest in any business-related property?		
		o to line 38. 1 106A/B	Schedule A/B: Property		page 5

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Par	Describe Any Farm- and Commercial Fishing-Related Property Yo If you own or have an interest in farmland, list it in Part 1.	u Own or Have an Interes	st In.	
46.	Do you own or have any legal or equitable interest in any farm	- or commercial fishin	g-related property?	
	No. Go to Part 7,			
	Yes. Go to line 47.			
Par	t 73. Describe All Property You Own or Have an Interest in That Yo	ou Did Not List Above		
I	Do you have other property of any kind you did not already lis Examples: Season tickets, country club membership No Yes. Give specific information	t?		
54. Par	Add the dollar value of all of your entries from Part 7. Write to	hat number here		\$0.00
55.				\$87,000.00
56.	Part 2: Total vehicles, line 5	\$15,100.00		
57.	Part 3: Total personal and household items, line 15	\$2,000.00		
58.	Part 4: Total financial assets, line 36	\$101.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+ \$0.00		
62.	Total personal property. Add lines 56 through 61	\$17,201.00	Copy personal property total	\$17,201.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$104,201.00

Fill in this info	ormation to identify your	case:		
Debtor 1	Kendrick William	S		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ALABAMA	
Case number	17-70027			
(if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B*: *Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2*: *Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	art 1: Identify the Property You Claim as	Exempt			
1.	Which set of exemptions are you claiming	1? Check one only, ever	n if yo	ur spouse is filing with you.	
	You are claiming state and federal nonbar	nkruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	☐ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/E	that you claim as exe	mpt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Copy the value from Check only one box for each exemption.		
	6820 Cold Springs Rd. Cottondale,	\$87,000.00		\$15,000.00	Ala. Code §§ 6-10-2, 6-10-3, 6-10-4: Const. Art. X, § 205
	AL 35453 Tuscaloosa County Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	0 10 4, 00110tt 7tt 11 X, 3 200
	2006 Hummer H-3 158200 miles	\$13,100.00		\$100.00	Ala. Code § 6-10-6
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
	2002 Mercedes-Benz Kompresso	\$2,000.00		\$2,000.00	Ala. Code § 6-10-6
	190,000 miles Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	
	Furniture, Furnishings, Electronics	\$1,500.00	1	\$1,500.00	Ala. Code § 6-10-6
	and Appliances Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
	Clothing	\$500.00		\$500.00	Ala. Code §§ 6-10-6, 6-10-126
	Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Debtor 1	Kendrick Williams			Case number (if known)	17-70027	
and decomposition and property and and		Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	sh On Hand e from Schedule A/B: 16.1	\$100.00		\$100.00	Ala. Code § 6-10-6	
LIII	o nom concede 742. 10.1		100% of fair market value, up to any applicable statutory limit			
	ecking: First Convenience Bank of	\$1.00		\$1.00	Ala. Code § 6-10-6	
	e from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit		
3. Are (Su	you claiming a homestead exemption object to adjustment on 4/01/19 and every 3	of more than \$160,37 3 years after that for ca	'5? ases fi	any applicable statutory limit	nt.)	
	Yes. Did you acquire the property covere	ed by the exemption w	ithin 1	,215 days before you filed this case	?	
	□ No					
	☐ Yes					

Fill in this info	ormation to identify you	ır case:			1	
Debtor 1	Kendrick Willian	ns				
Doubte	First Name		Name			
Debtor 2					8	
(Spouse if, filing)	First Name	Middle Name Last	Name			
United States I	Bankruptcy Court for the:	NORTHERN DISTRICT OF ALABAM	1A			
	4					
Case number (if known)	17-70027				☐ Chec	k if this is an
(,					amer	ded filing
Official Fo	rm 106D					
Schedul	D: Creditors	Who Have Claims Sec	ured	by Propert	у	12/15
	100	f two married people are filing together, bo				ation If more space
Be as complete a s needed, copy t number (if know	the Additional Page, fill it o	out, number the entries, and attach it to this	form. On	the top of any addition	nal pages, write your n	ame and case
1. Do any credito	rs have claims secured by	your property?				•
☐ No. Che	ck this box and submit th	nis form to the court with your other sche	dules. Yo	u have nothing else t	o report on this form.	
Yes Fill	in all of the information I	below.				
	All Secured Claims	I All Control of the		Column A	Column B	Column C
for each claim. If	more than one creditor has	nore than one secured claim, list the creditor so a particular claim, list the other creditors in Pa cal order according to the creditor's name.	eparately rt 2. As	Amount of claim Do not deduct the value of collateral	Value of collateral that supports this claim	Unsecured portion If any
2.1	ton Mortgage	Describe the property that secures the cla	im:	\$87,655.19	\$87,000.00	\$655.19
Service Creditor's Na		6820 Cold Springs Rd. Cottondal			-	/ (
		AL 35453 Tuscaloosa County	,			
P O Box	70001	As of the date you file, the claim is: Check	all that			
	x, AZ 85062-9001	apply Contingent				
	eet, City, State & Zip Code	Unliquidated				
Number, Su	eet, City, State & Zip Code	☐ Disputed				
Who owes the	debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as mortga	ige or seci	ıred		
Debtor 2 only		car loan)				
Debtor 1 and	Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic	's lien)			
	f the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this	claim relates to a	Other (including a right to offset)	tgage			
community	debt					
Date debt was in	ocurred 2001	Last 4 digits of account number	7552			
				\$42.04F.00	\$13,100.00	\$115.00
2.2 Credit A	cceptance	Describe the property that secures the cla	iim:	\$13,215.00	\$13,100.00	\$115.00
Creditor's Na	ime	2006 Hummer H-3 158200 miles				
25505 W	est 12 Mile Rd					
Suite 30		As of the date you file, the claim is: Check apply.	all that			
Southfie	eld, MI 48034	☐ Contingent				
Number, Str	eet, City, State & Zip Code	Unliquidated				
		☐ Disputed				
Who owes the	debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mortga	ige or secu	ıred		
☐ Debtor 2 only		car loan)				
Debtor 1 and		Statutory lien (such as tax lien, mechanic	's lien)			
	f the debtors and another	Judgment lien from a lawsuit				
☐ Check if this community	claim relates to a debt	Other (including a right to offset)	urity Int	erest		

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 2

Debte	or 1 Kendrick	Williams		Case number (if know)	17-70027
	First Name	Middle Name	Last Name		
Date (debt was incurred	Opened 12/13 Last Active 03/16	Last 4 digits of account number	0793	
If th Writ	is is the last page te that number her	of your form, add the do	A on this page. Write that number hillar value totals from all pages.	state \$100,870 \$100,870	
Use the trying than c	nis page only if you to collect from yo one creditor for an	u have others to be notiful	someone else, list the creditor in Pa isted in Part 1, list the additional cre	rt 1, and then list the collection ago	For example, if a collection agency is ency here. Similarly, if you have more tional persons to be notified for any
		treet, City, State & Zip Co ortgage Services	de	On which line in Part 1 did you ent	ter the creditor? 2.1
		Andrew Place		Last 4 digits of account number	_
		treet, City, State & Zip Coortgage Services	de	On which line in Part 1 did you ent	ter the creditor? 2.1
	P O Box 3489 Anaheim, CA			Last 4 digits of account number	_
	Name, Number, St	reet, City, State & Zip Co	de	On which line in Part 1 did you ent	ter the creditor? _2.2
	Po Box 513 Southfield, M			Last 4 digits of account number	_

page 2 of 2

Fill in t	his inforn	nation to identify your c	ase:					
Debtor	1	Kendrick Williams						
		First Name	Middle N	ame	Last Name			
Debtor (Spouse if		First Name	Middle N	ame	Last Name	;		
United :	States Bar	nkruptcy Court for the:	NORTHER	N DISTRICT OF AI	LABAMA			
Case n	umber 1	17-70027						
(if known)				_			_	heck if this is an
							ar	nended filing
Officia	al Form	106E/F						
		/F: Creditors Wi	a Hava	Lineacured	Claims			12/15
						Part 2 for creditors with NON	PRIORITY clair	
Schedule left. Attac name and	D: Credito th the Con d case nun	ors Who Have Claims Secu tinuation Page to this page nber (If known).	red by Proper . If you have i	ty. If more space Is no information to re	needed, copy 1	any creditors with partially s the Part you need, fill it out, r do not file that Part. On the to	lumber the ent	ries in the boxes on the
Part 1;	30	of Your PRIORITY Uns						
	•	rs have priority unsecured	Ciaillis agaill	st your				
`	No. Go to Pa	art 2.						
		l of Your NONPRIORITY	Ulmanaurad	Claima				
	•	rs have nonpriority unsecu		-		. 1.1		
□ ١	No. You hav	e nothing to report in this par	t. Submit this	form to the court with	your other sche	edules.		
	es.							
lines	ecured clain one credito	n list the creditor senarately	for each claim.	For each claim lister	 identify what t 	b holds each claim. If a credit type of claim it is. Do not list cla three nonpriority unsecured cl	ims already incl	uded in Part 1. If more
								Total claim
4.1		a Recovery		Last 4 digits of acc	ount number	8699	0	\$418.00
		Creditor's Name				Opened 01/14 Last A	ctive	
	7330 W Suite 11			When was the deb	t incurred?	10/13	ACTIVE	
	Wichita,	KS 67205						
-	Number St	reet City State Zlp Code		As of the date you	file, the claim i	is: Check all that apply		
		red the debt? Check one.		По го он				
	Debtor	,		Contingent				
	☐ Debtor	•		Unliquidated				
		1 and Debtor 2 only		☐ Disputed	31TV	d alaim.		
	Type of NONPRIORITY unsecured claim:							
	☐ Check debt	if this claim is for a comm	unity	Student loans	na out of a some	ration agreement or divorce th	at you did not	
		m subject to offset?		report as priority cla		nation agreement of divolce th	at you did not	
	■ No	•				g plans, and other similar debt	s	
	□Yes			Other Specify	Collection	for Speedycash		
	- 163			— Other, opecity				

Schedule E/F: Creditors Who Have Unsecured Claims

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34310

1 Kendrick Williams		Case number (if know)	17-70027	
Alabama One Credit Union	Last 4 digits of account num	ber 7071		\$130.00
Nonpriority Creditor's Name 1215 Veterans Mem. Pkwy.	When was the debt incurred	2016		
Tuscaloosa, AL 35404 Number Street City State Zlp Code Who incurred the debt? Check one	As of the date you file, the cl	aim is: Check all that apply		
Debtor 1 only	☐ Contingent			
Debtor 2 only	Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unse	eured claim:		
At least one of the debtors and another	Student loans	arou olami		
Check if this claim is for a community debt Is the claim subject to offset?		separation agreement or divorc	e that you did not	
■ No	☐ Debts to pension or profit-s	naring plans, and other similar o	debts	
☐ Yes	Other. Specify NSF Ac	count		
ARS/Account Resolution Specialist	Last 4 digits of account num	ber 5389		\$645.0
Nonpriority Creditor's Name	When was the debt incurred	01/12		
P O Box 459079 Sunrise, FL 33345	ANICH AGS THE GODT HICKING	01/12		
Number Street City State ZIp Code	As of the date you file, the c	aim is: Check all that apply		
Who incurred the debt? Check one				
Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	Disputed			
At least one of the debtors and another	Type of NONPRIORITY unse	cured claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a report as priority claims	separation agreement or divorc	e that you did not	
■ No	☐ Debts to pension or profit-s	haring plans, and other similar o	debts	
	Collect	on for Paragon Contra	cting	
	Debtor' DISPUT	eged debt is reported on s Credit Report. The D ES owing the alleged of I that it is barred by the	ebtor lebt, and	
□Yes		of Limitations.	applicable	

ARS/Account Resolution Specialist	Last 4 digits of account number	7296	\$432.00		
Nonpriority Creditor's Name P O Box 459079 Sunrise, FL 33345	When was the debt incurred?	11/11			
Number Street City State ZIp Code	As of the date you file, the claim i	s: Check all that apply			
Who incurred the debt? Check one					
Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	■ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Collection for Paragon Contracting				
☐ Yes	contend the	owing the alleged debt, and at it is barred by the applicable			
□ Yes	Statute of L	imitations.			
Capital One	Last 4 digits of account number	7184	\$253.00		
Capital One Nonpriority Creditor's Name P O Box 30285	otatute of t		\$253.00		
Capital One Nonpriority Creditor's Name	Last 4 digits of account number	7184 Opened 09/12 Last Active 12/15	\$253.00		
Capital One Nonpriority Creditor's Name P O Box 30285 Salt Lake City, UT 84130	Last 4 digits of account number When was the debt incurred?	7184 Opened 09/12 Last Active 12/15	\$253.00		
Capital One Nonpriority Creditor's Name P O Box 30285 Salt Lake City, UT 84130 Number Street City State ZIp Code	Last 4 digits of account number When was the debt incurred?	7184 Opened 09/12 Last Active 12/15	\$253.00		
Capital One Nonpriority Creditor's Name P O Box 30285 Salt Lake City, UT 84130 Number Street City State ZIp Code Who incurred the debt? Check one.	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim	7184 Opened 09/12 Last Active 12/15	\$253.00		
Capital One Nonpriority Creditor's Name P O Box 30285 Salt Lake City, UT 84130 Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim in the contingent	7184 Opened 09/12 Last Active 12/15	\$253.00		
Capital One Nonpriority Creditor's Name P O Box 30285 Salt Lake City, UT 84130 Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim in the contingent Unliquidated	7184 Opened 09/12 Last Active 12/15 s: Check all that apply	\$253.00		
Capital One Nonpriority Creditor's Name P O Box 30285 Salt Lake City, UT 84130 Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim in the contingent in the continue continu	7184 Opened 09/12 Last Active 12/15 is: Check all that apply	\$253.0		
Capital One Nonpriority Creditor's Name P O Box 30285 Salt Lake City, UT 84130 Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a sepa	7184 Opened 09/12 Last Active 12/15 s: Check all that apply	\$253.00		
Capital One Nonpriority Creditor's Name P O Box 30285 Salt Lake City, UT 84130 Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims	7184 Opened 09/12 Last Active 12/15 s: Check all that apply d claim:	\$253.00		
Capital One Nonpriority Creditor's Name P O Box 30285 Salt Lake City, UT 84130 Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a sepa	7184 Opened 09/12 Last Active 12/15 s: Check all that apply d claim: aration agreement or divorce that you did not g plans, and other similar debts	\$253.0		

6	CBSI	Last 4 digits of ac	count number	1552		\$89.00
	Nonpriority Creditor's Name				5	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	P O Box 3227 Tuscaloosa, AL 35403	When was the del	ot incurred?	07/11		
	Number Street City State Zlp Code	As of the date you	i file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.					
	Debtor 1 only	Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
	☐ At least one of the debtors and another	Type of NONPRIO	RITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations aris report as priority cla	•	aration agreement or divorce	e that you did not	
	■ No	Debts to pension	n or profit-sharin	ng plans, and other similar d	ebts	
			Collection	for Radiology Clinic		
	☐ Yes	Other, Specify	Debtor's Contend the	d debt is reported or redit Report. The De owing the alleged d at it is barred by the Limitations.	ebtor ebt, and	
7	Central Financial Control	Last 4 digits of ac	count number	1221		\$8,888.00
	Nonpriority Creditor's Name P O Box 66044	When was the del	ot incurred?	03/13		
	Anaheim, CA 92816 Number Street City State Zlp Code Who incurred the debt? Check one	As of the date you	ı file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	■ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIO	RITY unsecure	d claim:		
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Obligations aris		aration agreement or divorce	e that you did not	
	■ No	☐ Debts to pension	n or profit-sharin	ng plans, and other similar d	ebts	
			Collection	for Brookwood Medi	ical Center	
			Debtor's Co	d debt is reported or redit Report. The De owing the alleged d at it is barred by the	ebtor ebt, and	
	□ Yes	Other, Specify	Statute of I	imitations.		

Debtor	1 Kendrick Williams		Case number (if know) 17-70027	
4.8	Convergent Outsoucing, Inc Nonpriority Creditor's Name	Last 4 digits of account number	0209	\$1,107.00
	P O Box 9004 Renton, WA 98057	When was the debt incurred?	Opened 09/16 Last Active 06/16	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	1 claim:	
	At least one of the debtors and another	☐ Student loans	, oldini.	
	☐ Check If this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a sepa	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Collection	for Dish Network	
4.9	Easy Money Cash Centers Nonpriority Creditor's Name	Last 4 digits of account number	2516	\$1,562.00
	1678 Montgomery Hwy	When was the debt incurred?	2016	
	Birmingham, AL 35216 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated ·		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans	ration agreement or divorce that you did not	
	debt Is the claim subject to offset?	report as priority claims	tration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Personal L	oan	
4.1	Enterprise Rent-A-Car	Last 4 digits of account number	2C18	\$325.30
	Nonpriority Creditor's Name 1 Riverchase Office Plaza, 204 Birmingham, AL 35244	When was the debt incurred?	1/08/2016	
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans	aration agreement or divorce that you did not	
	debt Is the claim subject to offset?	report as priority claims	transiti agreement of divolce that you did not	
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other Specify Account		

Debtor	1 Kendrick Williams		Case number (if know)	17-70027	
4.1	EZPawn	Last 4 digits of account number	8154	-	\$1,250.00
	Nonpriority Creditor's Name 3728 McFarland Blvd. E Tuscaloosa, AL 35405	When was the debt incurred?	2016		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one:	Π.			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed	d alatas		
	At least one of the debtors and another	Type of NONPRIORITY unsecured Student loans	a ciaim;		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar de	ebts	
	□ Yes	,			
	Yes	Other. Specify Personal L	Odli	***	
4.1	First Premier	Last 4 digits of account number	3176		\$490.00
	Nonpriority Creditor's Name 601 S Minneapolis Ave Sioux Falls, SD 57104	When was the debt incurred?	Opened 09/13 Las 11/15	t Active	
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check If this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	-		
	■ No	Debts to pension or profit-sharing	ig plans, and other similar de	ebts	
	Yes	Other, Specify Credit Card			
4.1	First Premier Nonpriority Creditor's Name	Last 4 digits of account number	4345		\$527.00
	601 S Minneapolis Ave Sioux Falls, SD 57104	When was the debt incurred?	Opened 08/12 Las 11/15	t Active	
•	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims			
	No	Debts to pension or profit-sharin			
	□ Yes	Other. Specify Credit Card			
	169	Other, Specify			

Schedule E/F: Creditors Who Have Unsecured Claims

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Debt	or 1 Kendrick Williams		Case number (if know) 17-70027	
4.1	First Premier	Last 4 digits of account number	3286	\$374.00
	Nonpriority Creditor's Name 601 S Minneapolis Ave Sioux Falls, SD 57104 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim	Opened 09/13 Last Active 10/15/15 is: Check all that apply	
	Who incurred the debt? Check one. Debtor 1 only	Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharin	aration agreement or divorce that you did not ng plans, and other similar debts	
	Yes	Other. Specify Credit Card		
4.1 5	First Premier Nonpriority Creditor's Name	Last 4 digits of account number	8420	\$388.00
	601 S Minneapolis Ave Sioux Falls, SD 57104	When was the debt incurred?	Opened 08/12 Last Active 10/05/15	
	Number Street City State Zlp Code Who incurred the debt? Check one	As of the date you file, the claim	is: Check all that apply	
	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ■ No □ Yes	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharin ☐ Other. Specify ☐ Credit Carc	aration agreement or divorce that you did not ng plans, and other similar debts	
4.1	Franklin Collection Service, Inc	Last 4 digits of account number	9162	\$70.00
	Nonpriority Creditor's Name P O Box 3910 Tupelo, MS 38801 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim	Opened 09/16 Last Active 05/16	
	Who incurred the debt? Check one. Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No □ Yes	Debts to pension or profit-sharing Other. Specify Collection		

Schedule E/F: Creditors Who Have Unsecured Claims

Best Case Bankruptcy

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Debto	Kendrick Williams		Case number (if know) 17-70027			
.1	Midwest Recovery Systems Nonpriority Creditor's Name	Last 4 digits of account number	0700	\$5,086.00		
	P O Box 899 Florissant, MO 63032	When was the debt incurred?	Opened 09/16 Last Active 03/14			
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	Unliquidated				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans				
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not			
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts			
	Yes	Other Specify Collection	for Check N Go			
.1	Motormax Financial Services	Last 4 digits of account number	4205	\$4,000.00		
	Nonpriority Creditor's Name P O Box 468	When was the debt incurred?	10/2015			
	Columbus, GA 31902 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	Unliquidated				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a sepa	aration agreement or divorce that you did not			

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Other. Specify 2002 Chevrolet Avalanche

■ No

☐ Yes

Plaza Services, LLC	Last 4 digits of ac	count number	2177		\$618.0
Nonpriority Creditor's Name 110 Hammond Dr	When was the del	ot incurred?	2012		
Ste 110 Atlanta, GA 30328 Number Street City State Zlp Code	As of the date you	ı file, the claim i	s: Check all that apply		
Who incurred the debt? Check one,	☐ Contingent				
■ Debtor 1 only □ Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	Disputed				
☐ At least one of the debtors and another	Type of NONPRIO	RITY unsecured	d claim:		
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	Obligations aris		ration agreement or divorce	that you did not	
■ No	Debts to pension	n or profit-sharin	g plans, and other similar de	ebts	
		Collection	for Easy Money		
☐ Yes	Other Specify	Debtor's Cr DISPUTES	d debt is reported or redit Report. The De owing the alleged do at it is barred by the Limitations.	ebtor ebt, and	
Quality Recovery Services	Last 4 digits of ac	count number	74N1		\$670.
Nonpriority Creditor's Name 11659-B Hastings Bridge Road	When was the del	ot incurred?	Opened 09/10 Las 07/10	t Active	
Hampton, GA 30228 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you	ı file, the claim i	is: Check all that apply		
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	Disputed				
☐ At least one of the debtors and another	Type of NONPRIO	RITY unsecured	d claim:		
☐ Check if this claim is for a community	☐ Student loans				
debt			ration agreement or divorce	that you did not	
Is the claim subject to offset?	report as priority cl		ig plans, and other similar d	ebts	
No	La Debia to penaie	Collection	g plane, and earth entire		
		Debtor's Ci	d debt is reported or redit Report. The De owing the alleged d	ebtor	

Schedule E/F: Creditors Who Have Unsecured Claims

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Debte	Kendrick Williams	Case number (if know) 17-70027	
4.2	South Carolina Collections	Last 4 digits of account number 7023	\$635.00
	Nonpriority Creditor's Name P O Box 5929	When was the debt incurred? 05/10	
	Florence, SC 29502 Number Street City State Zlp Code Who incurred the debt? Check one	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
		Collection for Ferrigno Health	
n.	621	This alleged debt is reported on the Debtor's Credit Report. The Debtor DISPUTES owing the alleged debt, and contend that it is barred by the applicable	
	Yes	Other. Specify Statute of Limitations.	
4.2	State of Alabama Dept of Labor	Last 4 digits of account number 7547	\$4,500.00
	Nonpriority Creditor's Name 649 Monroe St	When was the debt incurred? 2015	
	Montgomery, AL 36131 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: Student loans	
	☐ Check If this claim is for a community debt Is the claim subject to offset?	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	- No	Unemployment Compensation	
	Yes	Other. Specify Overpayment	
4.2	TitleMax	Last 4 digits of account number 6602	\$1,355.88
3	Nonpriority Creditor's Name 720 E. Skyland Blvd.	When was the debt incurred? 2/20/2016	
	Tuscaloosa, AL 35405 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one	m	
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	Other. Specify Personal Loan	

Official Form 106 E/F Schedule
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Schedule E/F: Creditors Who Have Unsecured Claims

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Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor 1 Kendrick Williams		Case number (if know)	17-70027	
601 S Minnesota Ave Sioux Falls, SD 57104 Last 4 digits of account number		Part 2: Creditors with Nonpriority Unsecured Claims		
Name and Address First Premier 601 S Minnesota Ave Sioux Falls, SD 57104	On which entry in Part 1 or Part 2 did Line 4.14 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Prior Part 2: Creditors with Nong		
Name and Address First Premier 601 S Minnesota Ave Sioux Falls, SD 57104	On which entry in Part 1 or Part 2 did Line 4.15 of (Check one):	you list the original creditor? Part 1: Creditors with Prior Part 2: Creditors with Nong		
Name and Address Franklin Collection Service, Inc 2978 W Jackson St Tupelo, MS 38801	On which entry in Part 1 or Part 2 did Line 4.16 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Prior Part 2: Creditors with Nong	•	
Name and Address Midwest Recovery Systems 2747 W Clay St Ste A Saint Charles, MO 63301	On which entry in Part 1 or Part 2 did Line 4.17 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Prior Part 2: Creditors with None	•	
Name and Address Plaza Services, Llc 110 Hammond Drive Suite 110 Atlanta, GA 30328	On which entry in Part 1 or Part 2 did Line 4.19 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Prior Part 2: Creditors with Nong	•	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims om Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
*	1.			Total Claim
Total	6f _s	Student loans	6f.	\$ 0.00
claims om Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here, $\ensuremath{\mathbf{H}}$	6i.	\$ 33,879.18
	6j	Total Nonpriority. Add lines 6f through 6i.	6j.::	\$ 33,879.18

Page 12 of 12

SIMA	AN UNIX	Lange Carve, North Properties	, Light State			I
Fill in	n this info	ormation to identify your	case:			
Debte	or 1	Kendrick William First Name	Middle N	ame L	ast Name	
Debte		Fig. A.M.	A4:		ant Name	
	e if, filing)	First Name	Middle N		ast Name	
Unite	d States I	Bankruptcy Court for the:	NORTHERN	N DISTRICT OF ALAB	AMA	
	number	17-70027		<u></u>		
(if knov	vn)					☐ Check if this is an amended filing
l						<u>-</u>
Offi	cial F	orm 106G				
			v Contra	acts and Un	expired Leases	12/15
inforn additi	nation. If onal page	e and accurate as possit more space is needed, c es, write your name and we any executory contra	case number	onal page, fill it out, (if known).	together, both are equally respon number the entries, and attach it t	nsible for supplying correct to this page. On the top of any
	No. Che	eck this box and file this fo	rm with the co	urt with your other sch	edules. You have nothing else to re	
	☐ Yes. Fil	Il in all of the information b	elow even if the	e contacts of leases a	e listed on Schedule A/B:Property (Official Form 106 A/B).
е	xample,	ately each person or cor rent, vehicle lease, cell p ired leases.	mpany with with with with one). See the	hom you have the co e instructions for this fo	ntract or lease. Then state what earm in the instruction booklet for mor	ach contract or lease is for (for re examples of executory contracts
	Person o	or company with whom y Name, Number, Street, City			State what the contract or lease	is for
2.1					=	
	Name					
	Number	Street			t.	
	City		State	ZIP Code		
2.2	Name				-	*
	Number	Street				
2.2	City		State	ZIP Code		
2.3	Name				-	
					i i	
	Number	Street				
2.4	City		State	ZIP Code		
2.4	Name				-	
	Number	Street				
0.5	City		State	ZIP Code		
2.5	Name					
	Number	Street			4	

Official Form 106G

State

Schedule G: Executory Contracts and Unexpired Leases

ZIP Code

Page 1 of 1

City

	s information to identify you	r c250:			
F111 111 U11	s information to identity you	r case.		-175	
Debtor 1	Kendrick William		Last Name		
D 14: 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fi	iling) First Name	Middle Name	Last Name		
			- 05 41 45 444		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ALABAMA		
Case nun	nber 17-70027				— 0
(if known)					☐ Check if this is an
					amended filing
	al Form 106H dule H: Your Co	debtors			12/15
No Ye	es ithin the last 8 years, have young, California, Idaho, Louisian o. Go to line 3. es. Did your spouse, former sp	ou lived in a community pr a, Nevada, New Mexico, Pu	roperty state or territ o uerto Rico, Texas, Wash	r y? (Community propert	y states and territories include
3. In Co	olumn 1, list all of your code	btors. Do not include you	r spouse as a codebto	r if your spouse is filin	g with you. List the person shown he creditor on Schedule D (Official
in lin Form	ne 2 again as a codebtor only n 106D), Schedule E/F (Offici Column 2. Column 1: Your codebtor	, if that person is a guarar al Form 106E/F), or Sched	ntor or cosigner. Make	sure you have listed to 16G). Use Schedule D, Column 2: The cr	ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fil editor to whom you owe the debt
in lin Form	e 2 again as a codebtor only n 106D), Schedule E/F (Offici Column 2.	, if that person is a guarar al Form 106E/F), or Sched	ntor or cosigner. Make	sure you have listed t 16G). Use Schedule D,	ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fil editor to whom you owe the debt
in lin Form out C	ne 2 again as a codebtor only n 106D), Schedule E/F (Offici Column 2. Column 1: Your codebtor	, if that person is a guarar al Form 106E/F), or Sched	ntor or cosigner. Make	sure you have listed to 16G). Use Schedule D, Column 2: The cr	editor to whom you owe the debt es that apply:
in lin Form	ne 2 again as a codebtor only n 106D), Schedule E/F (Offici Column 2. Column 1: Your codebtor	, if that person is a guarar al Form 106E/F), or Sched	ntor or cosigner. Make	Sure you have listed to DGG). Use Schedule D, Column 2: The cr Check all schedul	editor to whom you owe the debt es that apply:
in lin Form out C	ne 2 again as a codebtor only 106D), Schedule E/F (Offici Column 2. Column 1: Your codebtor Name, Number, Street, City, State and	, if that person is a guarar al Form 106E/F), or Sched	ntor or cosigner. Make	Column 2: The cr Check all schedule D,	ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fil editor to whom you owe the debt es that apply: ne
in lin Form out C	ne 2 again as a codebtor only 106D), Schedule E/F (Officicolumn 2. Column 1: Your codebtor Name, Number, Street, City, State and Name	, if that person is a guarar al Form 106E/F), or Sched	ntor or cosigner. Make	Column 2: The cr Check all schedule D,	ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fil editor to whom you owe the debt es that apply: ne
in lin Form out C	ne 2 again as a codebtor only 106D), Schedule E/F (Offici Column 2. Column 1: Your codebtor Name, Number, Street, City, State and	, if that person is a guarar al Form 106E/F), or Sched	ntor or cosigner. Make	Column 2: The cr Check all schedule D,	ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fil editor to whom you owe the debt es that apply: ne
in lin Form out C	ne 2 again as a codebtor only 106D), Schedule E/F (Officicolumn 2. Column 1: Your codebtor Name, Number, Street, City, State and Name	y if that person is a guarar al Form 106E/F), or Scheo I ZIP Code	ntor or cosigner. Make dule G (Official Form 16	Sure you have listed to 16G). Use Schedule D, Column 2: The cr Check all schedule Schedule D, lir Schedule E/F, Schedule G, lir	editor to whom you owe the debt es that apply:
in lin Form out C	ne 2 again as a codebtor only 106D), Schedule E/F (Officicolumn 2. Column 1: Your codebtor Name, Number, Street, City, State and Name Number Street City	y if that person is a guarar al Form 106E/F), or Scheo I ZIP Code	ntor or cosigner. Make dule G (Official Form 16	Sure you have listed to 16G). Use Schedule D, Column 2: The cr Check all schedule Schedule D, lir Schedule E/F, Schedule G, lir	ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fil seditor to whom you owe the debt es that apply: ne
in lin Form out C	ne 2 again as a codebtor only 106D), Schedule E/F (Officicolumn 2. Column 1: Your codebtor Name, Number, Street, City, State and Name	y if that person is a guarar al Form 106E/F), or Scheo I ZIP Code	ntor or cosigner. Make dule G (Official Form 16	Sure you have listed to 16G). Use Schedule D, Column 2: The cr Check all schedule Schedule D, lir Schedule E/F, Schedule D, lir	ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill seditor to whom you owe the debt es that apply: ne ne
in lin Form out C	ne 2 again as a codebtor only 106D), Schedule E/F (Officicolumn 2. Column 1: Your codebtor Name, Number, Street, City, State and Name Number Street City	y if that person is a guarar al Form 106E/F), or Scheo I ZIP Code	ntor or cosigner. Make dule G (Official Form 16	Sure you have listed to 16G). Use Schedule D, Column 2: The cr Check all schedule Schedule D, lir Schedule E/F, Schedule G, lir	ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill seditor to whom you owe the debt es that apply: ne ne
in lin Form out C	ne 2 again as a codebtor only 106D), Schedule E/F (Officicolumn 2. Column 1: Your codebtor Name, Number, Street, City, State and Name Number Street City	y if that person is a guarar al Form 106E/F), or Scheo I ZIP Code	ntor or cosigner. Make dule G (Official Form 16	Sure you have listed to 16G). Use Schedule D, Column 2: The cr Check all schedule Schedule D, lir Schedule E/F, Schedule D, lir	ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill seditor to whom you owe the debt es that apply: ne ne

Page 1 of 1 Best Case Bankruptcy

ie-wi		· · · · · · · · · · · · · · · · · · ·	79 (- W - II) (m - 2011)							
	in this information to btor 1	Kendrick Wi								
	btor 2 buse, if filing)	·				_				
Uni	ited States Bankrup	tcy Court for the	: NORTHERN DISTRIC	CT OF ALABAMA						
	se number 17-	70027	-	•				ded filing ment showir	ng postpetition	chapter
O:	fficial Form	1061					13 incom		following date:	
_	chedule I:		ome				MM / DD	* * * * * *		12/15
spo atta	use. If you are sep ch a separate shee	arated and you	are married and not fili ir spouse is not filing w On the top of any additi	ith vou, do not inclu	de infor	matio	n about your s	pouse. If m	iore space is n	eeded,
1.	Fill in your emplo information.	oyment		Debtor 1			Debto	r 2 or non-f	filing spouse	
	If you have more that ach a separate		Employment status	Employed			■ Em	Employed		
	information about	1 0	☐ Not employed				☐ Not employed			
	employers.	account of	Occupation	Truck Driver						
	Include part-time, self-employed wo		Employer's name	Matheson						
	Occupation may it or homemaker, if		Employer's address	150 Allen Rd. Basking Ridge,	NJ 079	20				
			How long employed t	here?						
Par	t 2: Give Det	tails About Mor	nthly Income							
	mate monthly incouse unless you are s		ate you file this form. If	you have nothing to re	eport for	any lir	ie, write \$0 in t	ne space. In	clude your non	-filing
f yo	u or your non-filing : e space, attach a se	spouse have mo eparate sheet to	ore than one employer, co this form.	ombine the information	n for all	employ	ers for that per	son on the	ines below. If y	ou need
							For Debtor 1	47.4	ebtor 2 or ling spouse	
2.	List monthly grodeductions). If no	ss wages, sala ot paid monthly, o	ry, and commissions (becalculate what the month)	efore all payroll y wage would be.	2.	\$	3,621.77	<u> </u>	0.00	
3.	Estimate and list	t monthly overti	ime pay.		3.	+\$	0.00	+\$	0.00	
4.	Calculate gross l	Income. Add lin	ne 2 + line 3.		4.	\$	3,621.77	\$	0.00	

Yes. Explain:

				For	Debtor 1		ebtor 2 o		
	Сору	line 4 here	4.	\$	3,621.77	\$		0.00	
_				-					
5.	_	all payroll deductions:	E 0	¢	454.50	¢			
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$ \$	454.56	\$ \$		0.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$ _	0.00	\$		0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$ 	0.00	\$		0.00	
	5d.	Required repayments of retirement fund loans	5d.		0.00	\$		0.00	
	5e.	Insurance	5e.	\$	0.00	\$ 		0.00	
	5f.	Domestic support obligations	5f.	\$	0.00	1		0.00	
	5g.	Union dues	5g.	\$	0.00	\$		0.00	
	5h.	Other deductions. Specify: Uniforms	5h.+	\$	17.00	· \$		0.00	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6,	\$	472.21	\$		0.00	
7 1	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7;+;	\$	3,149.56	\$		0.00	
8.	List a 8a.	Net income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	1	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$		0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce							
		settlement, and property settlement.	8c.	\$	0.00	\$		0.00	
	8d.	Unemployment compensation	8d.	\$	0.00	\$		0.00	
	8e.	Social Security	8e.	\$	0.00	\$		0.00	
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f. 8g.	\$_ \$_	0.00	\$ 		0.00	
	8h.	Other monthly income. Specify: Income Tax Refund	8h.+	\$	783.00	+ \$		0.00	
9.	Add a	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	783.00	\$	1/1 74	0.00	
10.		ulate monthly income. Add line 7 + line 9. he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	- 8	3,932.56 + \$_		0.00 =	\$3,	932.56
11∞	Includ	all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not fy:	depend				chedule J. 11. +	\$	0.00
12.	Add 1 Write applie	the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certaes	sult is th in Liabil	e con ities a	nbined monthly in and Related <i>Data</i>	come. , if it	12. \$	3,	932.56
13.	Do yo	ou expect an increase or decrease within the year after you file this form	17				1000	mbined onthly ir	
		No.							

page 2 Schedule I: Your Income

Fill in this info	rmation to identify yo	our case						
Debtor 1	Kendrick Wi				Ch □	eck if this is: An amended	filing	
Debtor 2 (Spouse, if filing)))			A supplement showing postpetition chapter 13 expenses as of the following date:				
United States Ba	ankruptcy Court for the	NORTH	AMA		MM / DD / YY	ΥΥ		
Case number (If known)	17-70027	P						
Official F	Form 106J							
Schedu	le J: Your	Exper	ises				12/	
information. I	ete and accurate as If more space is ne nown). Answer ever	eded, atta	ch another sheet to this t	e filing together, bo form. On the top of	th are eq any addi	ually responsi tional pages, w	ble for supplying correct vrite your name and case	
	escribe Your House	hold						
■ No. G	joint case? so to line 2. Does Debtor 2 live i	in a senar	ate household?					
	□ No		ial Form 106J-2, <i>Expenses</i>	for Separate Housel	<i>hold</i> of De	ebtor 2.		
2. Do you h	nave dependents?	■ No						
Do not lis Debtor 2.	st Debtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor	2	Dependen age	live with you?	
Do not sta	tate the nts names.						□ No □ Yes	
dopondo	into marries,			:			□ No	
					-	_	☐ Yes☐ No	
							□ Yes	
				1		_	□ No	
							☐ Yes	
expenses	expenses include es of people other the and your depende	han 👝	No Yes					
Estimate volu	of a date after the b	our bankr	uotov filing date unless v	ou are using this fo lemental Schedule	orm as a s J, check	supplement in the box at the	a Chapter 13 case to report top of the form and fill in the	
Include exper the value of s (Official Form	such assistance and	non-cash d have ind	government assistance if cluded it on <i>Schedule I:</i> Y	you know our Income	200	You	ır expenses	
4. The renta payments	al or home owners s and any rent for the	hip exper e ground c	ises for your residence. In or lot.	nclude first mortgage	4.	\$	588.00	
If not inc	cluded in line 4:							
4a. Re	eal estate taxes				4a.	\$	0.00	
	operty, homeowner's	s, or renter	's insurance		4b.	\$	0.00	
4 11			**					
	ome maintenance, re omeowner's associat	•	upkeep expenses		4c. 4d.	\$ \$	75.00 0.00	

tor 1 Kendrick Williams	Case number (if knowr	17-70027
Utilities:		
6a. Electricity, heat, natural gas	6a, \$	350.00
6b. Water, sewer, garbage collection	6b. \$	85.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	0.00
6d. Other Specify: Cell Phone	6d. \$	285.00
Cable	\$	170.00
Trash	s	15.00
Food and housekeeping supplies	7. S	750.00
Childcare and children's education costs	8. \$	0.00
Clothing, laundry, and dry cleaning	9. \$	150.00
<u> </u>	10. \$	50.00
Personal care products and services	11. \$	150.00
Medical and dental expenses	11. 3	190.00
Transportation. Include gas, maintenance, bus or train fare.	12. \$	350.00
Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	0.00
Charitable contributions and religious donations	14. \$	150.00
	ιπ. Ψ	150.00
Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$	75.00
15b. Health insurance	15b. \$	0.00
15c. Vehicle insurance	15c. \$	259.00
	15d. \$	0.00
15d. Other insurance. Specify:	150. Ф	0.00
Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.	16. \$	0.00
Specify:	10. 4	0.00
Installment or lease payments:	17a. \$	0.00
17a. Car payments for Vehicle 1	17b. \$	0.00
17b. Car payments for Vehicle 2	176. \$	0.00
17c. Other. Specify:		
17d. Other. Specify:	17d. \$	0.00
Your payments of alimony, maintenance, and support that you did not report	as iv 18, \$	0.00
deducted from your pay on line 5, Schedule I, Your Income (Official Form 106 Other payments you make to support others who do not live with you.	s =====	0.00
	19.	0.00
Specify: Other real property expenses not included in lines 4 or 5 of this form or on So		
20a. Mortgages on other property	20a. \$	0.00
20b. Real estate taxes	20b. \$	0.00
	20c. \$	0.00
20c. Property, homeowner's, or renter's insurance	20d. \$	0.00
20d. Maintenance, repair, and upkeep expenses		
20e. Homeowner's association or condominium dues	20e. \$	0.00
Other: Specify:	21. +\$	0.00
Calculate your monthly expenses		
22a. Add lines 4 through 21.	\$	3,502.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-		0,000
	\$	2 502 00
22c. Add line 22a and 22b. The result is your monthly expenses.	•	3,502.00
Calculate your monthly net income.	1	
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	3,932.56
23b. Copy your monthly expenses from line 22c above.	23b\$	3,502.00
Low. Soly John Monday Superiors No. 1110 and diserts.	A * =====	
23c. Subtract your monthly expenses from your monthly income.		
The result is your monthly net income.	23c. \$	430.56
Do you expect an increase or decrease in your expenses within the year after For example, do you expect to finish paying for your car loan within the year or do you expect y modification to the terms of your mortgage? No.	you file this form? our mortgage payment to it	ncrease or decrease because o
Yes. Explain here:		

Fill in this informa	ation to identify your	case:				
Debtor 1	Kendrick Williams	Middle Name	Last Name			
Debtor 2	Filst Name	Middle Marie	East Hame			
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bank	ruptcy Court for the:	NORTHERN DISTR	ICT OF ALABAMA			
Case number 17	'-70027				_	
(if known)						Check if this is an amended filing
Official Form		n Individu	al Dobtor's	Schedules		12/15
Declaration	on About t	III III ai viaa	ai Bobtoi o	Contract		
years, or both. 18 t	J.S.C. §§ 152, 1341, 1 Below	519, and 3571.		esult in fines up to \$250		risonment for up to 20
■ No						
1 = 1	me of person					etition Preparer's Notice, lature (Official Form 119)
	of perjury, I declare rue and correct.	that I have read the s	ummary and schedul	es filed with this declar	ation and	
X /s/ Kendr	rick Williams		x			
	Williams of Debtor 1		Signa	ture of Debtor 2		
Date Ja	nuary 13, 2017		Date	<u> </u>		

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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CERTIFICATE OF SERVICE

This is to certify that on January 13, 2017, I have served a copy of the foregoing Summary of Assets and Liabilities and Schedules A - J on the attached Matrix by depositing a copy of the same in the United States Mail, postage prepaid and properly addressed, or if the party being served is a registered participant in the CM/ECF System for the United States Bankruptcy Court for the Northern District of Alabama, service has been made by a "Notice of Electronic Filing" as set forth below pursuant to FRBP 9036 in accordance with Paragraph II.B.4 of the Court's Administrative Procedures.

The Standing Chapter 13 Trustee, C. David Cottingham, and the Bankruptcy Administrator for the United States Bankruptcy Court for the Northern District of Alabama, J. Thomas Corbett, and the Assistant Bankruptcy Administrator for the United States Bankruptcy Court for the Northern District of Alabama, Western Division, Rachel Webber, have standing and are registered participants in the CM/ECF System for the United States Bankruptcy Court for the Northern District of Alabama, and service thereon has been made by a "Notice of Electronic Filing" as set forth below pursuant to FRBP 9036 in accordance with Paragraph II.B.4 of the Court's Administrative Procedures.

/s/Marshall Ft. Entelisano

Marshall A. Entelisano (ENT001)

Label Matrix for local noticing 1126-7 Case 17-70027-JHH13 NORTHERN DISTRICT OF ALABAMA Tuscaloosa Thu Jan 12 10:58:03 CST 2017 ARS/Account Resolution Specialist 1801 NW 66th Ave Fort Lauderdale, FL 33313-4571

Alabama One Credit Union 1215 Veterans Mem. Pkwy. Tuscaloosa, AL 35404-5842

Carrington Mortgage Services 1610 E. Saint Andrew Place Suite B150 Santa Ana, CA 92705-4931

Cbs Collection Division 550 Greensboro Ave Ste 3 Tuscaloosa, AL 35401-1547

Convergent Outsoucing, Inc 800 SW 39th St Renton, WA 98057-4975

Credit Acceptance Po Box 513 Southfield, MI 48037-0513

EZPawn 3728 McFarland Blvd. E Tuscaloosa, AL 35405-2402

First Premier 601 S Minneapolis Ave Sioux Falls, SD 57104

Franklin Collection Service, Inc P O Box 3910 Tupelo, MS 38803-3910 Steering Committee c/o Akin Gump Strauss Hauer & Feld LLP One Bryant Park Bank of America Tower New York, NY 10036-6745

ARS/Account Resolution Specialist P O Box 459079 Sunrise, FL 33345-9079

CBSI P O Box 3227 Tuscaloosa, AL 35403-3227

Carrington Mortgage Services P O Box 3489 Anaheim, CA 92803-3489

Central Financial Control P O Box 66044 Anaheim, CA 92816-6044

Convergent Outsoucing, Inc P O Box 9004 Renton, WA 98057-9004

EQUIPAX
Post Office Box 740241
Attn: Degal Department
Atlanta, 63 30374-0241

Easy Money Cash Centers 1678 Montgomery Kwy Birmingham, AL 35216-4914

First Premier 601 S Minnesota Ave Sioux Falls, SD 57104-4824

Midwest Recovery Systems 2747 W Clay St Ste A Saint Charles, MO 63301-2557 U. S. Bankruptcy Court 2005 University Blvd., Room 2300 Tuscaloosa, AL 35401-1546

Ad Astra Recovery 7330 W 33rd St. Suite 118 Wichita, KS 67205-9370

(p) CAPITAL ONE PO BOX 30285 SALT LAKE CITY UT 84130-0285

Carrington Mortgage Services P O Box 79001 Phoenix, AZ 85062-9001

Central Financial Control P O Box 660873 Dallas, TX 75266-0873

Credit Acceptance 25505 West 12 Mile Rd Suite 3000 Southfield, MI 48034-8331

EXPERIAN P O Box 9556 Allen, TX 75013

Enterprise Rent-A-Car 1 Riverchase Office Plaza, 204 Birmingham, AL 35244-2809

Franklin Collection Service, Inc 2978 W Jackson St Tupelo, MS 38801-6731

Midwest Recovery Systems P O Box 899 Florissant, MO 63032-0899 Motormax Financial Services P. O. Box 468 Columbus, GA 31902-0468 Plaza Services, LLC 110 Hammond Dr Ste 110 Atlanta, GA 30328-4806 Quality Recovery Services 11659-B Hastings Bridge Road Hampton, GA 30228-6279

South Carolina Collections P O Box 5929 Florence, SC 29502-5929 State of Alabama Dept of Labor 649 Monroe St Montgomery, AL 36131-0001 TRANSULION, LLC
Post Office Box 1000
Attn: Legal Department
Chester, AA 19022-1023

TitleMax 720 E. Skyland Blvd. Tuscaloosa, AL 35405-4039 University Orthopaedic Clinic, P.C. P.O. Box 2153, Dept. 5196 Birmingham, AL 35287-5196 C David Cottingham Chapter 13 Standing Trustee 701 22nd Avenue, Suite 4 P O Drawer 020588 Tuscaloosa, AL 35402-0588

Kendrick Williams 6820 Cold Springs Rd. Cottondale, XI 35453-2010 Marshall Entelisano 701 22nd Avenue Suite 2 Tuscaloosa. AL 35401-1857

The preferred mailing address (p) above has been substituted for the following entity/entities as so specified by said entity/entities in a Notice of Address filed pursuant to 11 U.S.C. 342(f) and Fed.R.Bank,P. 2002 (g)(4).

Capital One 15000 Capital One Dr Richmond, VA 23238

The following recipients may be/have been bypassed for notice due to an undeliverable (u) or duplicate (d) address.

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